Ministry of
Health Planning

SERVICE PLAN
2002/2003 – 2004/2005

Ministry of Health Planning

February 2002

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A *New Era* of Government Service

Three-year Service Plans represent an important part of the government's commitment to open and accountable government. In August 2001, the government amended the *Budget Transparency and Accountability Act* to require government to table a three-year Strategic Plan and annual three-year service plans for ministries and government organizations with the provincial budget. These Plans will ensure government and its individual ministries clearly outline their goals, and enable British Columbians to hold government accountable for its decisions and actions.

The government's Three Year Strategic Plan articulates the government's vision: *British Columbia is a prosperous and just province, whose citizens achieve their potential and have confidence in the future.* It also establishes three strategic goals that are key to achieving the government's overall vision:

- A strong and vibrant provincial economy
- A supportive social infrastructure
- Safe, healthy communities and a sustainable environment

This Service Plan details the Ministry's mission and objectives, which support the government's strategic goals. The Service Plan also includes performance measures that will be used to assess the Ministry's progress in achieving its objectives. Ministry objectives and performance measures are a new initiative. In some cases, as planning progresses, performance measures will become more detailed as they are further developed.

After the end of each fiscal year, the ministry will prepare a Service Plan Report that will describe actual accomplishments for the year just completed. The Report will include a comparison of planned and actual results, from both a financial and performance measure perspective and allow the public to assess the government's performance.

In the years ahead, Service Plans and Service Plan Reports, prepared by government ministries and organizations, will become the key tool by which government will manage public resources to ensure government programs are contributing, in a measurable way, to key government priorities in an efficient and effective manner.

The government's three-year Strategic Plan and Ministry three-year Service Plans will guide the reform of the province's public services so they meet British Columbians' needs. Measures to revitalize economic prosperity and protect and renew public services will lay the groundwork for a future of new opportunity for all British Columbians.

Accountability Statement

The 2002 - 2004/05 Ministry of Health Planning Service Plan was prepared under my direction in accordance with the *Budget Transparency and Accountability Act*. I am accountable for the basis on which the plan has been prepared. The plan was developed in the context of the government's *New Era* commitments which are to be addressed by May 17, 2005. All material fiscal assumptions and policy decisions as of January 28, 2002 have been considered in preparing the plan, and I am accountable for achieving the specific objectives in the plan.

Honourable Sindi Hawkins
Minister of Health Planning

February 6, 2002

BRITISH COLUMBIA

Ministry of Health Planning

I am pleased to present the Ministry of Health Planning's service plan for the next three fiscal years. The ministry was created in June 2001 to provide a dedicated focus in government on the longer term planning and vision needed to support a sustainable health care system that can continue to meet the needs of patients. The work of the Ministry of Health Planning provides the tools the Ministry of Health Services needs to achieve the government's priorities for health care, and while the two are separate ministries, they share the same vision, goals and values, and work together to address common issues concerning the health of British Columbians.

Over the next three years, the Ministry of Health Planning will create strategic long-term plans for key aspects of the health system, such as health human resources and information management. It will develop legislation, policy, standards and other performance management tools that will lead to positive changes and stronger accountability in the health system for the quality and effectiveness of the services it provides.

Through the Office of the Provincial Health Officer the Ministry will report on the health of British Columbians, and through health promotion and prevention programs and strategies it will support improved population health.

This service plan contains the strategies, performance measures and targets the Ministry of Health Planning will complete in the next three years to fulfil the strategic role it has been given in achieving our government's *New Era* goals for health. I look forward to putting this plan into action for the benefit of all British Columbians.

Sincerely,

Sindi Hawkins

Honourable Sindi Hawkins
Minister of Health Planning

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Introduction

In June 2001, the former Ministry of Health was restructured into two ministries — The Ministry of Health Planning and the Ministry of Health Services — to reflect the priority the new government places on a planned and accountable health services system. Although the mandates are distinct, the two ministries play essential complementary roles in ensuring the vitality and sustainability of B.C.'s health services system. Some responsibilities are jointly shared, others are shared but one Ministry has the lead, while in other areas a Ministry has exclusive responsibility.

While the two Ministries of Health provide overall leadership, direction, and financial stewardship for the B.C. health system, the health authorities are responsible for directly delivering health programs and services to British Columbians.

This service plan sets out the responsibilities for the Ministry of Health Planning's performance, and articulates the strategies for 2002/03 — 2004/05 that directly support the attainment of the government's goal of high quality public health care services that meet patients' needs, where they live and when they need it. The ministry's performance is positioned in relation to the performance of the health services system as a whole. To reflect the corresponding roles of the two ministries, a parallel service plan has been developed for the Ministry of Health Services. Thus, although this document details the Service Plan for the Ministry of Health Planning, elements of this plan — the vision, mission, values, ministry goals and planning context — are necessarily identical to those included in the service plan for the Ministry of Health Services. The reader is therefore reminded to review the two Ministries' plans in unison.

Strategic Context

(Shared with the Ministry of Health Services)

Planning Context

Fiscal Challenges

For the two-year period beginning 2003/04, the Ministry of Health Services and the Ministry of Health Planning will be subject to the capping of provincial government health care funding in nominal terms. This cap represents a decline in health care budgets in constant dollar terms, and a greater decline in constant per capita terms. The resulting pressures will be exacerbated by an anticipated increase in requests for timely health care services, resulting from changing demographic trends, and key cost drivers.

Demographic trends

- a net increase in population, of approximately 50,000 persons in each of 2001 and 2002, of 55,000 in 2003, and of 60,000 in 2004;
- increasing ethnic diversity of the B.C. population due to immigration; and,
- increasing average age of the population.

Key cost drivers

- a backlog of demand for health services resulting in long wait times for some services, originating in part from years of reduced Federal government transfers;
- an aging health capital infrastructure resulting from inadequate investment in equipment and buildings;
- compensation increases across the health sector;
- increasing pressure from both public and providers for government to fund new technologies, pharmaceuticals, and clinical interventions regardless of value for money or established effectiveness; and,
- absence of accountability and a lack of data to support management decision making.

Challenges and risks

- ensuring the delivery of a first class health system within a fixed budget;
- attracting and retaining high quality staff in the health sector;
- selecting for adoption only those new technologies which provide value for money and good patient outcomes;
- ensuring equity of access to health resources and quality of service across a large and geographically diverse province, with relatively few urban centres and many areas of sparse populations;
- meeting public and providers' expectations for health system innovation in the face of capped resources and major reorganization of the health system management structure;
- ensuring appropriate access to needed (medically required) services while managing both provider and public expectations that health and health related demands will be met though the public system;
- ensuring appropriate and productive stakeholder participation in the development of planning approaches in a newly configured health structure; and,
- aligning physicians' compensation incentives with population health outcomes goals.

Vision

The vision of the Ministry of Health Planning and the Ministry of Health Services is a health system that ensures high quality public health care services that meet patients' needs where they live and when they need them.

> *It's time to put patient care first. To do that we must renew public health care, through better management, adequate funding, proper staffing, and sound strategic planning*
>
> *— Gordon Campbell, Premier*

Mission

The joint mission of the Ministry of Health Planning and the Ministry of Health Services is to guide and enhance the province's health services in order to ensure British Columbians are supported in their efforts to maintain and improve their health. The top priorities of the two health ministries will be to fulfill the government's *New Era* vision of saving and renewing public health care and providing high quality public health care services that meet patients' most essential needs.

Values

The following value statements represent the set of beliefs that define our organizational behaviour:

Patient and Consumer Focus

Health services should be developed, delivered, and evaluated in collaboration with consumers and should respect the diversity of all British Columbians.

Equity

All British Columbians should have equity of access to health resources and equity in the quality of services provided.

Access

All British Columbians should have access to the health services they require.

Effectiveness

Health services should be managed and delivered to provide appropriate health outcomes for British Columbians.

Efficiency

Health services should be managed and delivered at the lowest cost consistent with quality services.

Appropriateness

Health services should provide the right service at the right time in the right place.

Safety

Health services should focus on minimizing risks to the health and safety of British Columbians.

These values are consistent with the principles for public health care of Accessibility, Comprehensiveness, Portability, Public Administration and Universality detailed in the *Canada Health Act*.

Strategic Shifts

The major strategic shifts being undertaken and the new core businesses for the health ministries have been developed to meet the *New Era* goals of providing high quality patient-centred care, improving the health and wellness of British Columbians and creating affordable and sustainable public health care. Significant, system-wide changes, clearly defined strategies and new long-term plans are needed to realize the *New Era* vision and goals.

These changes are also essential if the major problems plaguing B.C.'s health system are to be overcome and if B.C. is to attain a sustainable and affordable public system for the future. The current health system has been poorly managed and organized resulting in fragmented and inflexible delivery of services, waitlists in many areas, and a shortage of key health professionals. Our publicly funded system also has a finite ability to respond to the ever-growing list of demands from the public and from health providers. We are developing a better balance between what people want and their real health needs, what the system can realistically offer and what the province can afford to provide.

The B.C. government's vision and goals for saving and renewing public health care are reflected in the strategic shifts, the restructuring of the system and the health ministries, and the major initiatives outlined in this three-year service plan.

The strategic shifts are:

Better Planning and Management

From:

- A fragmented system
- Inadequate focus on patient's needs
- Little accountability for patient outcomes
- Inadequate financial control
- Lack of clear performance objectives and clear results

To:

- A planned and well-managed system
- Responsive to patient and population needs
- Accountable to the public for results
- Financial control through strong performance contracts between Health Authorities and the ministry which require successful outcomes and results

Meeting Patients' Real Health Needs

From:

- Ever-expanding scope of health sector
- Unlimited expectations of consumers
- Meeting demands regardless of cost or demonstrated benefit

To:

- A system that meets the real health needs of patients and the population, quickly, effectively, and efficiently.

Long-Term Sustainability

From:

- Escalating cost and limited resources reduced access to needed care

To:

- A sustainable system in which responsibility for appropriate use of health care services is shared among government, public, providers, and patients
- Efficient allocation of resources with consideration for economies of scale, scope and labour implications

Ministry Mandate

The role of the Ministry of Health Planning is to develop and articulate expectations of health system performance and monitor the health of British Columbians. Its core functions are to:

- Plan
- Develop legislation, policy, standards and other performance management tools
- Report on population health (Provincial Health Officer) and respond

Ministry Core Business

The Ministry of Health Planning was newly created on June 5, 2001 to provide a stronger focus and more sustained efforts towards proper long-term planning for B.C.'s health system, and to introduce new measures and expectations that will make the health system more accountable to British Columbians for the quality and effectiveness of the services it provides. The Ministry of Health Planning will also give health promotion and prevention activities a higher priority both as a means of improving the health and wellness of British Columbians and as a means of creating a more sustainable system for the future. Having a ministry dedicated to long-term health planning, creating a more accountable and sustainable health system, and a healthier population, are key to achieving the government's *New Era* vision and goals for health.

Planning, Policy and Legislation

This division, in collaboration with health care providers and others, develops long-term plans, establishes the broad accountability framework for the system and develops specific standards for outcomes and performance. The division also develops the policy, legislation and intergovernmental positions that allow these plans, standards and positions to be acted upon. This focus on the long-term planning and the policy and legislative arrangements through which the plans can take shape supports improved management of the system. The focus on standards (including wait time standards, standards for care and standards for access) will assist in quality improvement, transparency, equity of access and accountability.

Strategic Change Initiatives

This division will oversee specific projects designed to improve quality, access or efficiency. Working with staff from both ministries of health, other ministries of government, health care providers, administrators and researchers, the unit will undertake time-limited management projects and provide project management expertise for all areas of the health ministries.

Office of the Provincial Health Officer (PHO)/ Population Health and Wellness

Under the leadership of the Provincial Health Officer and working with the new health authorities, specific population health and wellness initiatives will be pursued which will help improve the health status of British Columbians. The Provincial Health Officer's priorities will also inform the ministry's work in long-term planning and strategic change initiatives by calling attention to urgent and emerging health issues.

The functions and duties of the Provincial Health Officer are detailed in the *Health Act*, and include providing independent advice to government on health issues, monitoring and reporting on the health of the people of B.C., identifying the need for legislation or a change of policy or practice respecting health in

British Columbia, working with regional medical health officers and the B.C. Centre for Disease Control to fulfill their legislated health protection and disease control mandates. This business area includes the Population Health and Wellness Division. The division develops and evaluates major provincial strategies, which will protect and improve the health of British Columbians and reduce future demands for health care services.

Corporate Services

Corporate support services are provided by the Ministry of Health Services, including financial, information management, human resources and freedom of information and protection of privacy functions.

Major Initiatives

Numerous major strategic initiatives will be pursued in the next three years, with many of these projects beginning in 2002. Some of these include a 10-year human resource strategy to enable B.C. to increase the numbers of health professionals to meet future needs; and implementation of performance management and accountability strategies that will create equitable access to specialized health services regardless of where patients live.

In conjunction with the Ministry of Health Services, new Primary Care Renewal and Chronic Disease Management strategies are being developed and specific primary health care projects launched. These new services will ensure more people in communities throughout B.C. have access to around the clock care outside of hospitals, while offering better support to those British Columbians living with chronic diseases such as asthma and diabetes.

And with Population Health and Wellness programs being transferred to the Ministry of Health Planning, there will be a new provincial Prevention and Wellness strategy developed in 2002-03. This strategy will focus on renewed efforts in illness and disease prevention, and targeted health promotion, disease and injury prevention activities designed to improve the health status of British Columbians and reduce costs to the health system.

All of these initiatives will be key to fulfilling the *New Era* goals of providing high quality patient-centred care, improving the health and wellness of British Columbians and building a sustainable, affordable public health care system.

Ministry Goals

GOAL 1: HIGH QUALITY PATIENT-CENTRED CARE

Patients receive appropriate effective, quality care at the right time in the right setting and health services are planned, managed and delivered around the needs of the patient.

GOAL 2: IMPROVED HEALTH AND WELLNESS FOR BRITISH COLUMBIANS

Support British Columbians in their pursuit of better health through protection, promotion and prevention activities.

GOAL 3: A SUSTAINABLE, AFFORDABLE PUBLIC HEALTH SYSTEM

A planned, efficient, affordable and accountable public health system, with governors, providers and patients taking responsibility for the provision and use of these services.

Performance Measures and Targets

Goal 1: High Quality Patient-Centred Care

Patients receive appropriate, effective, quality care at the right time in the right setting and health services are planned, managed and delivered around the needs of the patient.

Objective 1: Sound planning, policy and legislative framework for the health care system, based on need.	**Objective 2:** Clearly defined provincial standards for equitable and timely access to health care services.	**Objective 3:** Clearly defined provincial standards for quality health care delivery.	**Objective 4:** Inclusion of patient and public perspectives in health planning and policy development.

Strategies:

1. Use information on population health needs and status in planning of patient care.
2. Develop a quality assurance policy for regulated health professions.
3. Develop recommendations for an appropriate governance model for licensing functions.
4. Develop a framework for the delivery of provincial programs.
5. Develop provincial quality standards for selected services.
6. Develop provincial standards of access for selected services (i.e. primary care and chronic care).
7. Establish health service framework to identify and communicate government expectations and standards in a number of key areas, including all health services regulated through provincial legislation.
8. Identify mechanisms to determine patient and public perspectives and satisfaction.

Performance Measure:

1. Quality standards developed for selected services.
   - **Target 02/03:** 1) Select priority services for standard development.
     2) Complete consultation with relevant stakeholders.
   - **Target 03/04:** Articulate quality standards including indicators and targets.
   - **Target 04/05:** Implement quality standards (through inclusion in performance contracts).
2. Access standards developed for selected services.
   - **Target 02/03:** 1) Select priority services for access standard development.
     2) Complete consultation with relevant stakeholders.
   - **Target 03/04:** Develop and articulate access standards, targets and performance measures.
   - **Target 04/05:** Implement access targets through inclusion in performance contracts.
3. Long term plans for the health sector completed for the following areas.
   - **Target 02/03:** Health Human Resource Plan design and consultations completed.
   - **Target 03/04:** Complete four-year Capital Plan. Complete Acute Care and Intermediate and Long-term care facilities plan: Update Health Human Resource Plan. Complete design and consultation on medical machinery, equipment and technology.
   - **Target 04/05:** Proceed with implementation strategies for completed long term plans and update them based on new data. Update Capital Plan.
4. Mechanisms established to determine patient satisfaction.
   - **Target 02/03:** Complete development of mechanisms for measuring patient satisfaction.
   - **Target 03/04:** Achieve 70% patient satisfaction.
   - **Target 04/05:** Maintain minimum 70% patient satisfaction.

Goal 2: Improved Health and Wellness for British Columbians

Support British Columbians in their pursuit of better health through protection, promotion and prevention activities.

Objective 1: Identify preventable health conditions and high-risk health behaviors.	**Objective 2:** Identify health status inequalities.	**Objective 3:** Identify effective strategies to reduce occurrence of preventable illness, injuries and health risk.

Strategies:

1. Monitor and report on the health status of the population.
2. Determine effective targeted prevention and early intervention strategies and set standards for their delivery.
3. Set expectations to require health authorities to provide effective and targeted prevention programs.
4. Develop population-based immunization strategies and screening programs with specific emphasis on high-risk populations.
5. Develop measures and report on health services utilization among specific populations.

Performance Measure:

1. Report annually on population health status or a significant health issue.

   Target 02/03: Annual report produced (topic: Aboriginal health and well-being).

   Target 03/04: Annual report produced (topic to be determined).

   Target 04/05: Annual report produced (topic to be determined).

2. Monitoring with respect to the provincial health officer's recommendations.

   Target 02/03: Action taken on HIV reporting recommendation.

   Target 03/04: Action taken on 6 priority recommendations with respect to drinking water quality.

   Target 04/05: Action taken on recommendations to improve Aboriginal health.

3. Priority programs developed for prevention and protection.

   Target 02/03: Complete consultation on priority programs for health authorities.

   Target 03/04: Priority programs delivery expectations and performance measures finalized.

   Target 04/05: Complete development of mechanisms to ensure health authorities meet core program requirements such as:

   1) comprehensive and consolidated legislation (new *Public Health Act*),
   2) provincial policy,
   3) provincial standards,
   4) performance contract expectations, etc

4. Development of a new *Public Health Act*.

   Target 02/03: Revision of 3 public health acts (*Drinking Water Protection Act*, *Food Protection Act*, and *Community Care Facility Act*).

   Target 04/05: Public health legislation consolidated into a new *Public Health Act*.

Goal 3: A Sustainable, Affordable Health Care System

A planned, efficient, affordable and accountable public health system, with governors, providers and patients taking responsibility for the provision and use of these services.

Objective 1: Better planning and management of the health care system.	**Objective 2:** A health system accountable at every level.	**Objective 3:** Reduce the burden of cost on the public system.

Strategies:

1. Develop a comprehensive long-term health plan that includes: Human Resources Strategy; Hospital Facilities Plan; an Intermediate and Long-Term Care Facilities Plan; a Medical Machinery and Equipment Plan; an Information Technology Plan; a Rural and Remote Health Initiative; and an Electronic Health Record (EHR).
2. Review the Medical Services Commission structure and recommend new structures as appropriate.
3. Establish a comprehensive accountability and performance management strategy for health authorities and other providers.
4. Develop common methodologies for costing and monitoring the economic impact of diseases.
5. Within the framework of the *Canada Health Act* (CHA), develop a regulatory framework to support private sector involvement in capital financing, selected areas of service delivery and in the implementation of information technology services.
6. Explore options for increased patient-participation in non-CHA services (ie. user fees and co-payments based on ability to pay) that improve the utilization of services and allow services to be improved.
7. Participate in multi-lateral and bi-lateral negotiations to restore full federal funding to the provinces, and identify and pursue opportunities for collaboration with other provinces and the federal government in pharmaceuticals, health human resources, home and community care and information technology.

Performance Measure:

1. Establishment of a regulatory framework to ensure appropriate utilization of the private sector in the provision of health care.
   Target 02/03: Policy framework complete.
   Target 03/04: Implementation of regulatory framework.
   Target 04/05: 100% compliance with regulatory framework.
2. Percentage of the population appropriately insured for prescription drug costs.
   Target 02/03: Increase toward 100%.
   Target 03/04: 100%.
   Target 04/05: 100%.
3. Development of common methodologies for costing and monitoring.
   Target 02/03: Develop methodologies.
   Target 03/04: Methodologies completed and tested.
   Target 04/05: Methodologies implemented and monitored.

Consistency with Government's Priorities

Government's Priorities Related to the Ministry

- High quality public health care services that meet all patients' needs, where they live and when they need it.
- Better services for children, families and First Nations.
- Greater equity and equality for British Columbia in Canada.
- Responsible, accountable management of British Columbians' public resources and tax dollars.

Ministry Goals

1. High Quality Patient-Centred Care.
2. Improved Health and Wellness for British Columbians.
3. A Sustainable, Affordable Public Health System.

The Ministry of Health Planning is responsible for achieving the *New Era* commitments and Key Projects identified by the Premier in his mandate letter to the Minister. The Ministry also contributes towards ensuring that fiscal plans for the health services system meet the government's three-year budget targets and for implementing the organizational changes recommended by the Core Services Review.

The Ministry will work in tandem with the Ministry of Health Services to ensure that the *New Era* Commitments and government priorities are addressed. Health Planning will take the lead in planning activities, and Health Services will be responsible for implementation and monitoring of allocations to the health regions and the services they provide. Both ministries will work closely together in supporting the accountability goal of government.

The Ministry will also be working closely with the Ministry of Education and the Ministry of Advanced Education in achieving the health human resource planning priorities for the Health Services System. A major collaborative initiative will be the development of the 10-year Health Human Resource Plan, which will focus on improving the supply and retention of nurses, allied health professional and physicians. Planning short and intermediate term health human resource strategies such as the nursing strategies and physician residency programs will also be undertaken in collaboration with these ministries to address pressing labour market needs in the health care sector.

The Ministry will also continue to work closely with the Ministry for Children and Family Development in planning initiatives to address the health care needs of B.C.'s children including early childhood development initiatives and the provision of mental health services for children and youth.

Resource Summary

The following table summarizes the fiscal plans for 2002/03 through 2004/05 that achieve the 2004/05 fiscal targets provided to the Ministry of Health Planning.

SUMMARY EXPENDITURE PLAN

Core Businesses	2001/02 Restated Estimates	2002/03 Estimates	2003/04 Plan	2004/05 Plan
Operating Expenditures - $ 000				
Planning, Policy and Legislation	8,724	7,201	6,201	6,201
Strategic Change Initiatives	1,824	1,524	1,524	1,524
Office of the Provincial Health Officer / Population Health and Wellness	15,450	7,470	7,470	7,470
Minister's Office	438	438	438	438
Totals	26,436	16,633	15,633	15,633
FTEs	233	135	132	132

2002/03 FUNDING BY CORE BUSINESS AND MINISTRY GOAL[1] – MOHP

	$ 000			
Core Business	**Goal 1**	**Goal 2**	**Goal 3**	**Total**
Planning, Policy and Legislation	6,431		770	7,201
Strategic Change Initiatives	1,524			1,524
Office of the Provincial Health Officer / Population Health and Wellness		7,470		7,470
Minister's Office			438	438
Fiscal Year 02/03	**7,955**	**7,470**	**1,208**	**16,633**

	FTEs			
Core Business	**Goal 1**	**Goal 2**	**Goal 3**	**Total**
Planning, Policy and Legislation	44		12	56
Strategic Change Initiatives	15			15
Office of the Provincial Health Officer / Population Health and Wellness		60		60
Minister's Office			4	4
Fiscal Year 02/03	**59**	**60**	**16**	**135**

[1] Funding by goal was derived as follows: Goal 1 — Policy, legislation and strategic initiatives in support of high quality patient-centred care; Goal 2 — Office of the Provincial Health Officer and Health and Wellness Division; Goal 3 — Minister's office and planning activities in support of sustainability.

Appendix A: Information Resource Management Plans (IRMPs)

The on-going Core Review, potential Government-wide shared/centralized information technology services and budget reduction limit the extent to which the Ministry of Health Services and the Ministry of Health Planning can plan for their detailed information management/ information technology activities for 2002/03. This document will be updated as more information becomes available.

Mandate of the Information Management Group

The Information Management Group (IMG), funded by the Ministry of Health Services, supports the vision and goals of the Ministry of Health Planning and the Ministry of Health Services by fulfilling the following mandate:

IMG is responsible for providing province-wide information management strategies, policies and standards. It also coordinates the development and implementation of technology initiatives and infrastructure, such as HealthNet\B.C., that is necessary to electronically link the health sector. Within the Ministries, IMG is responsible for information management and technology planning, development, procurement, implementation and operations to ensure that appropriate information management and technology services are in place to support the business objectives of the program areas. IMG is also responsible for records management.

Health Information Management Priorities

In support of the health information management vision to have "the right information in the right hands at the right time to support health, health care delivery and health system sustainability", the Ministries have established the following priorities:

Provide information management and technology infrastructure to the Ministries:

- Work with Health Authorities and other health partners to develop a Strategic Plan for Health Information Management in British Columbia;
- Develop a comprehensive Technology Plan to assist health care professionals in delivering faster, more effective treatment to patients through new information technology and telemedicine (*New Era* commitment);
- Establish Electronic Health Record (EHR) that improves patient care and clinical decision making with due attention to security and privacy protection;
- Make health information and services electronically available to the public to help them improve wellness, learn about illnesses and treatment options, find appropriate health services and be able to receive certain services on-line; and,
- Provide aggregated health information to governors, administrators and researchers that will benefit planning and decision-making.

Major Projects

Pharmacare Plan I — This project will expand the variables used to determine program deductibles. The development of this system is estimated to take one year.

Provider Registry — Provider Registry is a standards-based repository of core data on health care providers. The system is one of the key components of a national Electronic Health Record, and is jointly funded and developed by the four western provinces and Health Canada. The project began in December 2001 and is scheduled to be ready for implementation by October 2002.

Secure Information Transport Strategic Options Project (e-Secure) — Its purpose is to determine practical options for secure information transport among the various health sector stakeholders. The security business requirement and technology options were completed in January 2002. Implementation is scheduled for 2002/03.

E-mail Conversion — Its purpose is to support a common government infrastructure by migrating e-mail/calendar from Netscape to Microsoft. The project is to be completed by July 2002.

HNData Phase Two — HNData is a data warehouse information utility designed to integrate information from the health sector to support decision-making, planning and research. Phase Two, to be completed by December 2002, will include source data from Acute Care, Vital Statistics, Continuing Care, Mental Health, Public Health, Environmental Health, and financial information.

Single Registry — Currently two different systems, containing beneficiary demographic information, are used to verify Medical Services Plan enrollment. These systems need to be merged to provide integrated demographic data that is web accessible. The single registry is estimated to reduce operating costs by $100K annually.

CHIPP Projects — Eight projects from B.C. were approved for Federal funding of $11.7 million. The eight projects are: B.C. Telehealth Program (Health Association of B.C.), Provider Registry (British Columbia Ministry of Health Services), TeleMentalHealth Services in B.C. and the Yukon (Mental Health Evaluation and Community Consultation Unit/U.B.C.), Bridges to Better Health (Children & Women's Health Centre of B.C.), Central B.C. and Yukon Telemedicine Initiative (Interior Health Authority), Implement an Integrated Community Mental Health Information System (Vancouver Island Health Authority), HealthLink (Interior Health Authority), and SYNAPSE Multi-Jurisdictional Mental Health Information System Project (Vancouver Coastal Health Authority).

MSP Direct Phase II — This is a web based interface system for Registration and Premium Billing. Built on the success of Phase I, which provided the employer groups with the ability to access, verify and update certain information regarding their employees through the web, Phase II is expected to extend the same ability to individual beneficiaries.

Feasibility Study for Public Access To Health Information — Its purpose is to conduct a feasibility study for providing the public with web access to the Immunization data located at B.C. Centre for Disease Control. Issues involved are data ownership, freedom of information and protection of privacy, and authentication.

Conclusion

Information Management/Information Technology (IM/IT) plays a key role in accessing, processing and disseminating health information to support the day-to-day operation, administration, management and long term planning of the health system. It is increasingly seen as a necessary investment and an essential tool for achieving the government's commitments

of electronic service delivery/e-government, telehealth/telemedicine and accountability. As the Ministries re-examine their core services and administrative structure, many programs are looking at information technology as their chosen solution to improving service delivery and efficiency. Although the current budget reality poses significant challenges to delivering the much needed IM/IT services and long term solutions, the Ministries will continue to be innovative in fulfilling the IM/IT promises.

Appendix B: Human Resource Management Plan (HRMP)

The critical human resources issues for the Ministry of Health Services and the Ministry of Health Planning are organization planning and workforce adjustment in order to build capacity to meet the operational requirements resulting from the extensive changes and impacts to employees expected to result from Core Review, budget reductions and other cross government initiatives. The corporate goal is to rebuild and sustain a professional public service capable of providing quality services to British Columbia residents. The Ministry of Health Services provides the corporate support services for human resource planning for both the Ministry of Health Services and the Ministry of Health Planning.

The HRMP prepared for the Public Service Employee Relations Commission includes performance measures for each of the goals and objectives presented below.

Goal	Objective	Strategy	Performance Measures/Outcomes/ Indicators
Organization Planning A skilled and competent workforce capable of delivering on new ministry goals	• Ensure the right people with the appropriate skills are staffed in the right positions	• Develop an organization plan to support business redesign	• A clear organization plan and structure
Workforce Adjustment Redundant positions and surplus employees identified and people affected are treated with fairness, consideration and subject to due process	• Identify the workforce adjustment implications of budget reductions • Implement changes and evaluate during transition	• Create an executive-based Transition Steering Committee to oversee work force adjustment and restructuring, including a communication plan • Identify the redundant positions and surplus employees • Identify the succession planning implications due to early retirement and employee movement • Complete the Workforce Adjustment process provided in the Handbook • Early Retirement Incentive Program delivered • Determine and provide education and support to managers and employees	• % and $ change in workforce to meet budget requirements, as determined • Retirement projections distributed to senior managers • Early Retirement Incentive Program delivered
Recruitment Talented people attracted to new opportunities	• Find and attract capable individuals for opportunities	• Identify difficult to recruit positions and conduct targeted strategies to find qualified people	• Positions filled within 14 weeks of posting
Employee Learning Skilled, capable, learning employees that support achievement of ministry goals	• Ensure employees have the skills to do their jobs and are growing their skills for new and changing opportunities	• Identify cross training or enhanced skill development required for new organization • Build learning plans into performance management plans • Build diversified learning opportunities such as job shadowing, mentoring, project assignments, etc.	• Skilled employees performing job duties • 5% of employees involved in diversified learning opportunities

Goal	Objective	Strategy	Performance Measures/Outcomes/ Indicators
Management Learning Skilled, capable, learning managers that support achievement of ministry goals	• Develop skilled managers who provide strong organizational leadership	• Build learning plans into performance management plans • Conduct change management training for managers	• Skilled managers performing job duties
Career Planning Career growth and professional development for employees	• Provide an environment of self reliance for advancement and learning	• Support career plans as part of performance management plans • Maintain an electronic career planning program	• Career plans developed
Succession Planning People for key positions and leadership roles identified both now and in the future	• Ensure long term plan to fill human resource needs of ministry and government	• Identify and plan for workforce implications due to early retirement and employee movement • Identify knowledge transfer strategies • Identify a leadership development strategy	• Potential candidates identified for all key roles